

**Educator Preparation Program
Student Academic Grievance Form**

Name _____ Major _____
SID/SSN _____ Day Phone _____
Address _____ Alt. Phone _____
City/St./Zip _____ Email _____

Step One: Description of Grievance

Date of Incident _____ Name of Instructor _____
Course Section _____

Write grievance summary or attach prepared document:

Student/Instructor Conference Date _____ Resolved
 Unsolved
Student Signature _____
Instructor Signature _____

If the matter is resolved, then the process ends here. Otherwise, proceed to STEP TWO within 5 days.
Forward supporting documentation as necessary

Step Two: Program Manager Conferences

Student/Program Manager Conference Date _____ Resolved
Instructor/Program Manager Conference Date _____ Unsolved
Student Signature _____
Program Manager Signature _____

If the matter is resolved, then the process ends here. Otherwise, proceed to STEP THREE within 5 days.
Forward supporting documentation as necessary

Step Three: Inclusive Conference

Student/Instructor/Program Manager Conference Date _____ Resolved
 Unsolved
Student Signature _____
Instructor Signature _____
Program Manager Signature _____

If the matter is resolved, then the process ends here. Otherwise, proceed to STEP FOUR within 5 days.
Forward supporting documentation as necessary

Step Four: Program Manager Action

Upon consideration of the circumstances presented, I hereby affirm* _____/deny _____ the grievance in question.
*Written explanation must be forwarded to instructor.

Program Manager Signature _____ Date _____

I accept _____/reject _____ the decision of the Program Manager
Student Signature _____

I accept _____/reject _____ the decision of the Program Manager
Instructor Signature _____

If the matter is resolved, then the process ends here. Otherwise, proceed to STEP FIVE within 5 days.
Forward supporting documentation as necessary

Step Five: Grievance Review Committee Conference

Student/Grievance Review Committee Conference Date _____

Resolved

Unsolved

Student Signature _____

Instructor Signature _____

Program Manager Signature _____

Grievance Review Committee Signatures _____

If the matter is resolved, then the process ends here. Otherwise, proceed to STEP SIX within 5 days.
Forward supporting documentation as necessary

Step Six: Grievance Review Committee Action

Upon consideration of the circumstances presented, I hereby affirm* _____/deny _____ the grievance in question.

*Written explanation must be forwarded to instructor and Program Manager.

Grievance Review Committee Signature _____ Date _____

I accept _____/reject _____ the decision of the Program Manager
Student Signature _____

I accept _____/reject _____ the decision of the Program Manager
Instructor Signature _____

I accept _____/reject _____ the decision of the Program Manager
Program Manager Signature _____

Grievance Review Committee Signatures _____

If the matter is resolved, then the process ends here. Otherwise, proceed to STEP SEVEN within 5 days.
Forward supporting documentation as necessary

Step Seven: Appeal to Economic Workforce Development Vice Chancellor

Action by Economic Workforce Development Vice Chancellor
Final Arbitration

Student/Instructor/Program Manager/Grievance Review Committee/Economic Workforce Development Vice Chancellor Conference Date _____

Upon consideration of the circumstances presented, I hereby affirm* _____/deny _____ the grievance in question.

Economic Workforce Development Vice Chancellor Signature _____

Economic Workforce Development Vice Chancellor's Remarks:

*A conference with the instructor and Program Manager must be held and written explanations of the decision must be provided.
Refer to Student Academic Grievance Policy: FLD Local

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Director of Human Resources
Title IX Coordinator
Human Resources Department
201 W. Sheridan, Bldg. AA
San Antonio, Texas 78204